

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000011658

1. Corporation Name

MANATEE EXPRESS, INC

Principal Place of Business

820 31ST ST E  
PALMETTO FL 34221

Mailing Address

820 31ST ST E  
PALMETTO FL 34221

FILED  
Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90006 017 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/08/1994

4. FEI Number

65-0464768

Applied For

NOT APPLICABLE

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

WALLACE, MAMIE A  
820 31ST ST E  
PALMETTO FL 34221

10. Name and Address of New Registered Agent

81 Name MICHAEL D. WALLACE

82 Street Address (P.O. Box Number is Not Acceptable)

601 FAMCEE AVE

83

84 City TALLAHASSEE

FL

85 Zip Code 32310

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Michael D. WALLACE / CD

(NOTE: Registered Agent signature required when reinstating)

4-26-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME WALLACE, ELIHU  
STREET ADDRESS 820 31ST ST E  
CITY-STATE-ZIP PALMETTO FL 34221

☐ DELETE

TITLE CD  
NAME WALLACE, MICHAEL D  
STREET ADDRESS 820 31ST ST E  
CITY-STATE-ZIP PALMETTO FL 34221

☐ DELETE

TITLE STD  
NAME WALLACE, MAMIE A  
STREET ADDRESS 820 31ST ST E  
CITY-STATE-ZIP PALMETTO FL

☒ DELETE

TITLE VD  
NAME MCKINNEY, BRODERICK K  
STREET ADDRESS 820 31ST ST E  
CITY-STATE-ZIP PALMETTO FL 34221

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE MICHAEL D. WALLACE, SR  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99

Date

(850) 878-1762

Daytime Phone #

CR2E034 (11/98)